Congress Should Seize this Historic Opportunity to Add Dental Coverage to Medicare – But Vouchers are Not the Answer

Joint Statement by the Center for Medicare Advocacy, Families USA, Justice in Aging, Medicare Rights Center, National Committee to Preserve Social Security and Medicare and Public Citizen

Washington, DC – Congress is poised to make an historic investment in lowering people’s health care costs, including by adding needed dental, hearing and vision benefits to the Medicare program. Without coverage, dental care is very expensive and out of reach for millions of people in America. The lack of dental care clearly results in adverse health consequences, and for far too long, oral health care has been separated from overall health care for older adults and people with disabilities who rely on Medicare.

Our organizations strongly support a robust and comprehensive dental benefit in Part B of Medicare, available to all Medicare beneficiaries, and integrated with the delivery of other health care benefits. We urge Congress to take this important step toward improving health equity that would extend coverage to 62 million older adults and people with disabilities including 31 million low-income beneficiaries.

Recent reports suggest that policymakers are now considering a dental voucher program for Medicare beneficiaries as the sole dental policy in the reconciliation package. As beneficiary advocacy organizations with considerable experience with the roll-out of health care coverage policies, we actively oppose vouchers as they are not a replacement for real coverage. We have significant concerns that vouchers (including debit cards, flexible savings accounts, or money to
purchase private dental insurance) would not adequately address the problems they are meant to solve, and we urge Congress to pursue a different path.

Vouchers instead of coverage for dental care would not effectively target those with the greatest dental needs, would be administratively complex, and would direct valuable resources away from getting a more permanent benefit off the ground. Vouchers would be susceptible to significant fraud and abuse, could lead to increased prices for care, and could lead to mistrust of the program by both enrollees and providers. In turn, these factors would minimize any expected public support for a final reconciliation bill.

People across America have fought back against attempts to turn Medicare into a voucher system before – to enact a voucher program now would set a bad precedent in the Medicare program which is built on a foundation of universal access and coverage.

There are better approaches to building up a meaningful dental benefit in Part B that would achieve the goal of providing immediate access to essential dental care to those most in need. For example, Congress could expand current (but limited) medically necessary dental coverage and add emergency dental coverage (which could be implemented quickly). Congress could also create a preventive services benefit as a path to a more comprehensive benefit. We urge Congress to work with stakeholders, including beneficiary advocates, on steps that advance the larger goal.

Eight in 10 voters favor adding dental coverage to Medicare now, and they want their problem solved, instead of temporary or half-measures. It’s time for Congress to heed their call.

The Center for Medicare Advocacy (medicareadvocacy.org) is a national, non-profit law organization that works to advance access to comprehensive Medicare coverage, health equity, and quality health care for older people and people with disabilities. The Center provides legal assistance, education, analysis, and advocacy with a focus on the concerns of people with longer-term and chronic conditions. The organization’s systemic positions and actions are based on the experiences of the real people we hear from every day.

Families USA (familiesusa.org) a leading national, non-partisan voice for health care consumers, is dedicated to achieving high-quality, affordable health care and improved health for all. Our work is driven by and centered around four pillars: value, equity, coverage, and consumer experience. We view these focus areas — and the various issues unique to each area — as the cornerstones of America’s health care system.

Justice in Aging (justiceinaging.org) is a national organization that uses the power of law to fight senior poverty by securing access to affordable health care, economic security, and the courts for older adults with limited resources. Since 1972, we’ve focused our efforts primarily on those who have been marginalized and excluded from justice such as women, people of color, LGBTQ individuals, and people with limited English proficiency.

The Medicare Rights Center (www.medicarerights.org) is a national, nonprofit consumer service organization that works to ensure access to affordable health care for older adults and
people with disabilities through counseling and advocacy, educational programs, and public policy initiatives.

**National Committee to Preserve Social Security and Medicare** ([ncpssm.org](http://ncpssm.org)) The mission of the National Committee to Preserve Social Security and Medicare, a membership organization, is to protect, preserve, promote, and ensure the financial security, health, and the well being of current and future generations of maturing Americans.

**Public Citizen** ([citizen.org](http://citizen.org)) is a nonprofit consumer advocacy organization that champions the public interest in the halls of power. We defend democracy, resist corporate power and work to ensure that government works for the people – not for big corporations. Founded in 1971, we now have 500,000 members and supporters throughout the country.